

Fill in this information to identify your case:

United States Bankruptcy Court for the:

WESTERN DISTRICT OF PENNSYLVANIA

Case number (if known)

Chapter 7

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Three Rivers Ice Cream Service, Inc.

2. All other names debtor used in the last 8 years
Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 25-1270722

4. Debtor's address

Principal place of business	Mailing address, if different from principal place of business
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100 Fleet Street - #201
Pittsburgh, PA 15220
Number, Street, City, State & ZIP Code

P.O. Box, Number, Street, City, State & ZIP Code

Allegheny
County

Location of principal assets, if different from principal place of business

Number, Street, City, State & ZIP Code

5. Debtor's website (URL)

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership (excluding LLP)

☐ Other. Specify:

Debtor Three Rivers Ice Cream Service, Inc.
Name

Case number (if known) _____

7. Describe debtor's business A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Railroad (as defined in 11 U.S.C. § 101(44))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. § 501)
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

4244

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- ☒ Chapter 7
☐ Chapter 9
☐ Chapter 11. Check all that apply:
☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
☐ A plan is being filed with this petition.
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11 (Official Form 201A) with this form.
☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.
☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

- ☒ No.
☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

- ☒ No
☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor	_____	Relationship	_____
District	_____	When	_____
		Case number, if known	_____

Debtor **Three Rivers Ice Cream Service, Inc.**
Name

Case number (if known)

11. Why is the case filed in this district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☒ No

☐ Yes.

Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard?

☐ It needs to be physically secured or protected from the weather.

☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐ Other

Where is the property?

Number, Street, City, State & ZIP Code

Is the property insured?

☐ No

☐ Yes. Insurance agency

Contact name

Phone

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

☐ Funds will be available for distribution to unsecured creditors.

☒ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

☒ 1-49

☐ 50-99

☐ 100-199

☐ 200-999

☐ 1,000-5,000

☐ 5001-10,000

☐ 10,001-25,000

☐ 25,001-50,000

☐ 50,001-100,000

☐ More than 100,000

15. Estimated Assets

☒ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☐ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

16. Estimated liabilities

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☐ \$1,000,001 - \$10 million

☒ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

Debtor Three Rivers Ice Cream Service, Inc.
Name

Case number (if known) _____

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on February 20, 2019
MM / DD / YYYY

X /s/ Aimee Elizabeth Rice
Signature of authorized representative of debtor

Title Wind-down Advisor

Aimee Elizabeth Rice
Printed name

18. Signature of attorney

X /s/ Robert O Lampl
Signature of attorney for debtor

Date February 20, 2019
MM / DD / YYYY

Robert O Lampl 19809
Printed name

Robert O Lampl Law Office
Firm name

Benedum Trees Building
223 Fourth Avenue, 4th Floor
Pittsburgh, PA 15222
Number, Street, City, State & ZIP Code

Contact phone 412-392-0330

Email address rlampl@lampllaw.com

19809
Bar number and State

Fill in this information to identify the case:

Debtor name Three Rivers Ice Cream Service, Inc.

United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☐ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☐ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☐ *Schedule H: Codebtors* (Official Form 206H)
- ☐ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule* _____
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on February 20, 2019

X /s/ Aimee Elizabeth Rice

Signature of individual signing on behalf of debtor

Aimee Elizabeth Rice

Printed name

Wind-down Advisor

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name Three Rivers Ice Cream Service, Inc.

United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)

1a. Real property:

Copy line 88 from *Schedule A/B* \$ 0.00

1b. Total personal property:

Copy line 91A from *Schedule A/B* \$ 0.00

1c. Total of all property:

Copy line 92 from *Schedule A/B* \$ 0.00

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D* \$ 0.00

3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)

3a. Total claim amounts of priority unsecured claims:

Copy the total claims from Part 1 from line 5a of *Schedule E/F* \$ 0.00

3b. Total amount of claims of nonpriority amount of unsecured claims:

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F* +\$ 15,249,143.01

4. Total liabilities

Lines 2 + 3a + 3b

\$ 15,249,143.01

Fill in this information to identify the case:

Debtor name Three Rivers Ice Cream Service, Inc.

United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

☒ No. Go to Part 2.

☐ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments?

☒ No. Go to Part 3.

☐ Yes Fill in the information below.

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

☒ No. Go to Part 4.

☐ Yes Fill in the information below.

Part 4: Investments

13. Does the debtor own any investments?

☒ No. Go to Part 5.

☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

☒ No. Go to Part 6.

☐ Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

☒ No. Go to Part 7.

Debtor Three Rivers Ice Cream Service, Inc.
Name

Case number (if known) _____

☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

☒ No. Go to Part 8.

☐ Yes Fill in the information below.

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

☒ No. Go to Part 9.

☐ Yes Fill in the information below.

Part 9: Real property

54. Does the debtor own or lease any real property?

☒ No. Go to Part 10.

☐ Yes Fill in the information below.

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

☒ No. Go to Part 11.

☐ Yes Fill in the information below.

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☒ No. Go to Part 12.

☐ Yes Fill in the information below.

Debtor **Three Rivers Ice Cream Service, Inc.**
Name

Case number (if known)

Part 12. Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1	\$0.00	
81. Deposits and prepayments. Copy line 9, Part 2.	\$0.00	
82. Accounts receivable. Copy line 12, Part 3.	\$0.00	
83. Investments. Copy line 17, Part 4.	\$0.00	
84. Inventory. Copy line 23, Part 5.	\$0.00	
85. Farming and fishing-related assets. Copy line 33, Part 6.	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7.	\$0.00	
87. Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$0.00	
88. Real property. Copy line 56, Part 9..... >		\$0.00
89. Intangibles and intellectual property. Copy line 66, Part 10.	\$0.00	
90. All other assets. Copy line 78, Part 11.	+ \$0.00	
91. Total. Add lines 80 through 90 for each column	\$0.00	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$0.00

Fill in this information to identify the case:

Debtor name Three Rivers Ice Cream Service, Inc.

United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☒ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☐ Yes. Fill in all of the information below.

Fill in this information to identify the case:

Debtor name Three Rivers Ice Cream Service, Inc.

United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☒ No. Go to Part 2.

☐ Yes. Go to line 2.

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

3 1	Nonpriority creditor's name and mailing address Allegheny Health Network P.O. Box 645266 Pittsburgh, PA 15264 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25.00
3 2	Nonpriority creditor's name and mailing address Armstrong Cable Service P.O. Box 37749 Philadelphia, PA 19101-5049 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$359.59
3 3	Nonpriority creditor's name and mailing address AT&T Mobility PO Box 6463 Carol Stream, IL 60197-6463 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$114.02
3 4	Nonpriority creditor's name and mailing address Cintas PO Box 631025 Cincinnati, OH 45263-1025 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$312.87

Debtor **Three Rivers Ice Cream Service, Inc.**
Name

Case number (if known)

3 5	Nonpriority creditor's name and mailing address Cintas Corporation PO Box 630910 Cincinnati, OH 45263-0910 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,567.85
3 6	Nonpriority creditor's name and mailing address Consolidated Graphic Communication 3444 Momentum Place Chicago, IL 60689-5334 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$290.54
3 7	Nonpriority creditor's name and mailing address Constellation New Energy, Inc. P.O. Box 4640 Carol Stream, IL 60197-4640 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$57,691.77
3 8	Nonpriority creditor's name and mailing address CRH Catering Co. 1600 Morrell Avenue Connellsville, PA 15425 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$813.55
3 9	Nonpriority creditor's name and mailing address CRH Complete 4110 Davison Street Pittsburgh, PA 15201 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$307.90
3 10	Nonpriority creditor's name and mailing address Crystal and Hinkley Springs PO Box 660579 Dallas, TX 75266-0579 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13.64
3 11	Nonpriority creditor's name and mailing address Deer Creek Drainage Authority P.O. Box 148 945 Little Creek Road Russellton, PA 15076 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$531.00

Debtor **Three Rivers Ice Cream Service, Inc.**
Name

Case number (if known)

3 12	Nonpriority creditor's name and mailing address Federal Express Corporation PO Box 371461 Pittsburgh, PA 15250-7461 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$356.51
<hr/>			
3 13	Nonpriority creditor's name and mailing address Grainger Dept. 808513824 Palatine, IL 60038-0001 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,904.25
<hr/>			
3 14	Nonpriority creditor's name and mailing address Idhasoft, Inc. P.O. Box 56346 Atlanta, GA 30343 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$300.00
<hr/>			
3 15	Nonpriority creditor's name and mailing address J.J. Keller and Associates, Inc. P.O. Box 6609 Carol Stream, IL 60197-6609 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$95.47
<hr/>			
3 16	Nonpriority creditor's name and mailing address Kuhn's Market 537 Rochester Road Pittsburgh, PA 15237 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$100.00
<hr/>			
3 17	Nonpriority creditor's name and mailing address Lowe's PO Box 530954 Atlanta, GA 30353-0954 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,883.42
<hr/>			
3 18	Nonpriority creditor's name and mailing address Mailfinance Dept. 3682 P.O. Box 123682 Dallas, TX 75312-3682 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$868.55

Debtor	Three Rivers Ice Cream Service, Inc. Name _____	Case number (if known) _____
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3 19	Nonpriority creditor's name and mailing address MedExpress Corporate Care Bill P.O. Box 7964 Belfast, ME 04915-7900 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply</i> \$216.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3 20	Nonpriority creditor's name and mailing address Mobil Fleet Wash, Co. P.O. Box 12612 Pittsburgh, PA 15241 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply</i> \$3,255.21 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3 21	Nonpriority creditor's name and mailing address Neofunds by Neopost P.O. Box 30193 Tampa, FL 33630-3193 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply</i> \$289.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3 22	Nonpriority creditor's name and mailing address Oakmont Water Authority P.O. Box 73 Oakmont, PA 15139-0073 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply</i> \$2,166.97 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3 23	Nonpriority creditor's name and mailing address PA Turnpike Commission Commercial Vehicles Operation P.O. Box 644386 Pittsburgh, PA 15264-4386 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply</i> \$1,570.75 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3 24	Nonpriority creditor's name and mailing address Paetec P.O. Box 9001013 Louisville, KY 40290-1013 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply</i> \$4,429.05 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3 25	Nonpriority creditor's name and mailing address Paper Products Co., Inc. 760 Commonwealth Drive Warrendale, PA 15086 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply</i> \$1,090.17 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **Three Rivers Ice Cream Service, Inc.**
Name

Case number (if known)

3 26 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply** **\$1,471.42**
Refrigiwear Inc.
P.O. Box 39
Dahlonega, GA 30533
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
☐ Contingent
☒ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3 27 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply** **\$400.00**
Retail Grocers Service, Inc.
P.O. Box 774
599 Vine Avenue
Sharon, PA 16146
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
☐ Contingent
☒ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3 28 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply** **\$953.72**
Source 1 N.A.
527 Cedar Way
Oakmont, PA 15139
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
☐ Contingent
☒ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3 29 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply** **\$1,952.00**
SPS Commerce, Inc.
P.O. Box 205782
Dallas, TX 75320-5782
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
☐ Contingent
☒ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3 30 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply** **\$212.31**
Sunco, Inc.
P.O. Box 78013
Phoenix, AZ 85062-8013
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
☐ Contingent
☒ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3 31 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply** **\$105.69**
The Hite Company
P.O. Box 1807
Altoona, PA 16603-1807
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
☐ Contingent
☒ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3 32 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply** **\$630.00**
Toner Warehouse Direct, LLC
929 W. Liberty Avenue
Wheaton, IL 60187
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
☐ Contingent
☒ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

Debtor **Three Rivers Ice Cream Service, Inc.**

Case number (if known)

3 33	Nonpriority creditor's name and mailing address UPMC - UPMC Passavant P.O. Box 382059 Pittsburgh, PA 15250-8059 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$200.00
3 34	Nonpriority creditor's name and mailing address Vector Security, Inc. P.O. Box 89426 Cleveland, OH 44101-6462 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,887.16
3 35	Nonpriority creditor's name and mailing address Verizon Wireless PO Box 25505 Lehigh Valley, PA 18002-5505 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,038.98
3 36	Nonpriority creditor's name and mailing address Vision Business Products P.O. Box 643897 Pittsburgh, PA 15264-3897 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,087.15
3 37	Nonpriority creditor's name and mailing address W. PA Teamsters & Employers Pension Fund 900 Parish Street, Suite 101 Pittsburgh, PA 15220 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,500,000.00
3 38	Nonpriority creditor's name and mailing address Western PA Teamsters Pension Fund 900 Parish Street, Suite 101 Pittsburgh, PA 15220 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$654,601.50
3 39	Nonpriority creditor's name and mailing address White Oak Springs Presbyterian Church 102 Shannon Road Renfrew, PA 16053 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$50.00

Part 3: List Others to Be Notified About Unsecured Claims

Debtor Three Rivers Ice Cream Service, Inc.
Name

Case number (if known) _____

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 0.00
5b. +	\$ 15,249,143.01
5c.	\$ 15,249,143.01

Fill in this information to identify the case:

Debtor name Three Rivers Ice Cream Service, Inc.

United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☒ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☐ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).

Property

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

2.2 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

2.3 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

2.4 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

Fill in this information to identify the case:

Debtor name Three Rivers Ice Cream Service, Inc.

United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206H Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
☐ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name	Mailing Address	Name	Check all schedules that apply:
2.1	Street City State Zip Code		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2	Street City State Zip Code		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3	Street City State Zip Code		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4	Street City State Zip Code		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Fill in this information to identify the case:

Debtor name Three Rivers Ice Cream Service, Inc.

United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue
Check all that apply

Gross revenue
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:
From 1/01/2019 to Filing Date

☒ Operating a business
☐ Other _____

\$0.00

For prior year:
From 1/01/2018 to 12/31/2018

☒ Operating a business
☐ Other _____

\$0.00

For year before that:
From 5/01/2017 to 4/30/2018

☒ Operating a business
☐ Other _____

\$39,501,338.71

For the fiscal year:
From 5/01/2016 to 4/30/2017

☒ Operating a business
☐ Other _____

\$70,920,804.80

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

Description of sources of revenue

Gross revenue from
each source
(before deductions and
exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

Debtor Three Rivers Ice Cream Service, Inc.

Case number (if known) _____

☒ None.

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer Check all that apply
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4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
--	-------	-----------------------	---------------------------------

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. Cleary, et al. v. Three Rivers Ice Cream Service, Inc. 2:18-CV-00887-MRH	Unfunded Pension Liability	U.S. District Court W. D. Pa.	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**☐ None

Debtor Three Rivers Ice Cream Service, Inc.

Case number (if known) _____

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1. See Attached List			\$10,267.26

Recipients relationship to debtor

Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).		

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1. Robert O Lampl Law Office Benedum Trees Building 223 Fourth Avenue, 4th Floor Pittsburgh, PA 15222	Attorney Fees	2/6/19	\$4,537.70
Email or website address rlampl@lampllaw.com			

Who made the payment, if not debtor?

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value

13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Three Rivers Ice Cream Service, Inc.
GL Account Ledger - Detail By Date Range (Current and History)
02/01/2017 through 02/01/2019

Batch	Journal	Entry #	Date	Job	Document	Description	Debits	Credits	Balance
625-00					GENERAL ADM CONTRIBUTIONS				
9333	A	207221	02/25/17		Jewish Fed cont	Amortize PPD Expenses	833.33	-	(\$5,400.02)
9387	A	209399	04/01/17		Jewish Fed cont	Amortize PPD Expenses	833.33	-	(4,566.69)
9575	CS	214201	04/29/17			2016 Closing Entry	2,900.03	-	(3,733.36)
9446	A	211107	04/29/17		Jewish Fed cont	Amortize PPD Expenses	833.33	-	(833.33)
9638	AP	216886	06/12/17		2017MEMORIAL	Autism Society Of Pittsburgh - FOURSOME MYRON COPE	2,500.00	-	2,500.00
9576	AP	214689	06/16/17		2017SNSSPONSO	Muscular Dystrophy Association - individual golfer	600.00	-	3,100.00
9652	A	217603	07/29/17			Expense reclass for July	25.00	-	3,125.00
9711	AP	219430	09/12/17		DONATION	White Oak Springs Presby - Walker-Jamison	50.00	-	3,175.00
9792	D	221375	09/30/17			Cash Receipt	475.00	-	3,650.00
9795	D	221383	10/05/17			Cash Receipt	95.00	-	3,745.00
9868	A	222671	12/30/17			Amortize PPD Expenses	-	4,867.24	(1,122.24)
9992	CS	223606	04/28/18			2017 Closing Entry	1,122.24	-	-
					GENERAL ADM CONTRIBUTIONS TOTAL:				
							\$10,267.26	\$4,867.24	\$0.00
					TOTAL OF LEDGER:				
							\$10,267.26	\$4,867.24	\$0.00

#4

Debtor Three Rivers Ice Cream Service, Inc.

Case number (if known) _____

Who received transfer?
Address

Description of property transferred or
payments received or debts paid in exchange

Date transfer
was made

Total amount or
value

Part 7: Previous Locations

14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

Address

Dates of occupancy
From-To

14.1. 24 Frontier Drive
Gibsonia, PA 15044

14.2. 11676 Perry Highway
suite 1100
Wexford, PA 15090

Part 8: Health Care Bankruptcies

15. Health Care bankruptcies

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

☒ No. Go to Part 9.

☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services
the debtor provides

If debtor provides meals
and housing, number of
patients in debtor's care

Part 9: Personally Identifiable Information

16. Does the debtor collect and retain personally identifiable information of customers?

☒ No.

☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

☐ No. Go to Part 10.

☒ Yes. Does the debtor serve as plan administrator?

☐ No Go to Part 10.

☒ Yes. Fill in below:

Name of plan

Employer identification number of the plan
EIN: 25-1270722

Has the plan been terminated?

☐ No

☒ Yes

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units

Debtor Three Rivers Ice Cream Service, Inc.

Case number (if known) _____

18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ None

	Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1	Citizens Bank 4570 Fifth Avenue Pittsburgh, PA 15213	XXXX-5969	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other____	2/8/19	\$4,537.70

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
---	--	-----------------------------	-----------------------

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
3 Rivers Express 24 Frontier Drive Gibsonia, PA 15044	N/A	Frozen ice cream inventory Remaining inventory sold 3/14/18	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

Debtor Three Rivers Ice Cream Service, Inc.

Case number (if known) _____

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	-------------------------------------	--------------------	----------------

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

Business name address	Describe the nature of the business	Employer identification number Do not include Social Security number or ITIN.	Dates business existed
-----------------------	-------------------------------------	--	------------------------

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☐ None

Name and address	Date of service From-To
26a.1. Aimee Rice 1009 Suzanne Court Bethel Park, PA 15102	10/2015 to 12/31/17

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

- ☐ None

Name and address	Date of service From-To
26b.1. R.D. Hoag (Ron Parker) 555 N. Bell Avenue, No. 100 Carnegie, PA 15106	2/1/17 to 1/10/19

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

- ☐ None

Name and address	If any books of account and records are unavailable, explain why
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Debtor Three Rivers Ice Cream Service, Inc.

Case number (if known) _____

Name and address

If any books of account and records are unavailable, explain why

26c.1. **Aimee Rice**
1009 Suzanne Court
Bethel Park, PA 15102

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address

26d.1. **Citizens Bank**
4570 Fifth Avenue
Pittsburgh, PA 15213

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

- ☒ No
☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory

Date of inventory

The dollar amount and basis (cost, market, or other basis) of each inventory

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Thomas Freed	5009 Grandiflora Road Palm Beach Gardens, FL 33418	Treasurer	32.799599
Lloyd Freed Jr.	928 Red Oak Drive Pittsburgh, PA 15238	Vice President	26.336624
Brian Freed	506 SE 7th Street, Unit 305 Fort Lauderdale, FL 33301		.323149
Phyllis Freed Trust	3127 Devonshire Way Palm Beach Gardens, FL	Owner	40.540637

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☒ No
☐ Yes. Identify below.

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☒ No
☐ Yes. Identify below.

Debtor Three Rivers Ice Cream Service, Inc.

Case number (if known) _____

Name and address of recipient

Amount of money or description and value of property

Dates

Reason for providing the value

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☐ No
☒ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

Three Rivers Ice Cream Service

EIN: 25-1270722

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on February 20, 2019

/s/ Aimee Elizabeth Rice

Signature of individual signing on behalf of the debtor

Aimee Elizabeth Rice

Printed name

Position or relationship to debtor Wind-down Advisor

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☒ No
☐ Yes

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In Re:		:	Bankruptcy No.
	Three Rivers Ice Cream Service, Inc.	:	
		:	Chapter 7
		:	
	Debtor	:	
		:	
	Three Rivers Ice Cream Service, Inc.	:	
Movant		:	Related to Document No. 1
		:	
		:	
	v.	:	
		:	
No Respondent		:	

NOTICE REGARDING FILING OF MAILING MATRIX

In accordance with Local Bankruptcy Rule 1007-1(e) I, Robert O Lampl 19809, counsel for the debtor(s) in the above-captioned case, hereby certify that the following list of creditors' names and addresses was uploaded through the creditor maintenance option in CM/ECF to the above-captioned case.

By: /s/ Robert O Lampl

Signature
Robert O Lampl 19809

Typed Name
Benedum Trees Building
223 Fourth Avenue, 4th Floor
Pittsburgh, PA 15222

Address
412-392-0330 Fax:412-392-0335

Phone No.
19809

List Bar I.D. and State of Admission

B2030 (Form 2030) (12/15)

United States Bankruptcy Court
Western District of Pennsylvania

In re Three Rivers Ice Cream Service, Inc.

Debtor(s)

Case No.

Chapter 7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept _____	\$	<u>0.00</u>
Prior to the filing of this statement I have received _____	\$	<u>0.00</u>
Balance Due _____	\$	<u>0.00</u>

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

February 20, 2019

Date

/s/ Robert O Lampl

Robert O Lampl 19809

Signature of Attorney

Robert O Lampl Law Office

Benedum Trees Building

223 Fourth Avenue, 4th Floor

Pittsburgh, PA 15222

412-392-0330 Fax: 412-392-0335

rlampl@lampllaw.com

Name of law firm

**United States Bankruptcy Court
Western District of Pennsylvania**

In re **Three Rivers Ice Cream Service, Inc.**

Debtor(s)

Case No.
Chapter

7

VERIFICATION OF CREDITOR MATRIX

I, the Wind-down Advisor of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **February 20, 2019**

/s/ Aimee Elizabeth Rice

Aimee Elizabeth Rice/Wind-down Advisor
Signer/Title

Allegheny Health Network
P.O. Box 645266
Pittsburgh, PA 15264

Armstrong Cable Service
P.O. Box 37749
Philadelphia, PA 19101-5049

AT&T Mobility
PO Box 6463
Carol Stream, IL 60197-6463

Cintas
PO Box 631025
Cincinnati, OH 45263-1025

Cintas Corporation
PO Box 630910
Cincinnati, OH 45263-0910

Consolidated Graphic Communication
3444 Momentum Place
Chicago, IL 60689-5334

Constellation New Energy, Inc.
P.O. Box 4640
Carol Stream, IL 60197-4640

CRH Catering Co.
1600 Morrell Avenue
Connellsville, PA 15425

CRH Complete
4110 Davison Street
Pittsburgh, PA 15201

Crystal and Hinkley Springs
PO Box 660579
Dallas, TX 75266-0579

Deer Creek Drainage Authority
P.O. Box 148
945 Little Creek Road
Russellton, PA 15076

Federal Express Corporation
PO Box 371461
Pittsburgh, PA 15250-7461

Grainger
Dept. 808513824
Palatine, IL 60038-0001

Idhasoft, Inc.
P.O. Box 56346
Atlanta, GA 30343

J.J. Keller and Associates, Inc.
P.O. Box 6609
Carol Stream, IL 60197-6609

Kuhn's Market
537 Rochester Road
Pittsburgh, PA 15237

Lowe's
PO Box 530954
Atlanta, GA 30353-0954

Mailfinance
Dept. 3682
P.O. Box 123682
Dallas, TX 75312-3682

MedExpress Corporate Care Bill
P.O. Box 7964
Belfast, ME 04915-7900

Mobil Fleet Wash, Co.
P.O. Box 12612
Pittsburgh, PA 15241

Neofunds by Neopost
P.O. Box 30193
Tampa, FL 33630-3193

Oakmont Water Authority
P.O. Box 73
Oakmont, PA 15139-0073

PA Turnpike Commission
Commercial Vehicles Operation
P.O. Box 644386
Pittsburgh, PA 15264-4386

Paetec
P.O. Box 9001013
Louisville, KY 40290-1013

Paper Products Co., Inc.
760 Commonwealth Drive
Warrendale, PA 15086

Refrigiwear Inc.
P.O. Box 39
Dahlonega, GA 30533

Retail Grocers Service, Inc.
P.O. Box 774
599 Vine Avenue
Sharon, PA 16146

Source 1 N.A.
527 Cedar Way
Oakmont, PA 15139

SPS Commerce, Inc.
P.O. Box 205782
Dallas, TX 75320-5782

Sunco, Inc.
P.O. Box 78013
Phoenix, AZ 85062-8013

The Hite Company
P.O. Box 1807
Altoona, PA 16603-1807

Toner Warehouse Direct, LLC
929 W. Liberty Avenue
Wheaton, IL 60187

UPMC - UPMC Passavant
P.O. Box 382059
Pittsburgh, PA 15250-8059

Vector Security, Inc.
P.O. Box 89426
Cleveland, OH 44101-6462

Verizon Wireless
PO Box 25505
Lehigh Valley, PA 18002-5505

Vision Business Products
P.O. Box 643897
Pittsburgh, PA 15264-3897

W. PA Teamsters & Employers Pension Fund
900 Parish Street, Suite 101
Pittsburgh, PA 15220

Western PA Teamsters Pension Fund
900 Parish Street, Suite 101
Pittsburgh, PA 15220

White Oak Springs Presbyterian Church
102 Shannon Road
Renfrew, PA 16053

**United States Bankruptcy Court
Western District of Pennsylvania**

In re Three Rivers Ice Cream Service, Inc.

Debtor(s)

Case No.

Chapter

7

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for Three Rivers Ice Cream Service, Inc. in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☒ None [Check if applicable]

February 20, 2019

Date

/s/ Robert O Lampl

Robert O Lampl 19809

Signature of Attorney or Litigant

Counsel for Three Rivers Ice Cream Service, Inc.

Robert O Lampl Law Office

Benedum Trees Building

223 Fourth Avenue, 4th Floor

Pittsburgh, PA 15222

412-392-0330 Fax:412-392-0335

rlampl@lampllaw.com